Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
EASTERN DISTRICT OF NEW YORK	-	
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	Robert First name W Middle name Cobb Last name and Suffix (Sr., Jr., II, III)	Pirst name R Middle name Cobb Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years		
	Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-2127	xxx-xx-4889

	otor 1 Robert W Cobb otor 2 Diane R Cobb		Case number (if known)
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs.	■ I have not used any business name or EINs.
	Include trade names and doing business as names	Business name(s)	Business name(s)
		EINs	EINs
5.	Where you live	05.45.40.4	If Debtor 2 lives at a different address:
		8 East End Road Rocky Point, NY 11778	
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Suffolk	
		County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason.	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason.
		Explain. (See 28 U.S.C. § 1408.)	Explain. (See 28 U.S.C. § 1408.)

	otor 1 otor 2	Diane R Cobb					Case number (if known)	
Par	t 2:	Tell the Court About	our Bar	nkruptcy Ca	se			
7.	Bank	chapter of the cruptcy Code you are sing to file under				each, see <i>Notice Required by</i> age 1 and check the appropriat	11 U.S.C. § 342(b) for Individuals Filing e box.	for Bankruptcy
	CHOC	ising to me under	■ Cha	pter 7				
			☐ Cha	pter 11				
			☐ Cha	pter 12				
			☐ Cha	pter 13				
8.	How	you will pay the fee	a o a	bout how yo rder. If your pre-printed	u may pay. Typica attorney is submit address.	ally, if you are paying the fee yo ting your payment on your beh	k with the clerk's office in your local coupurself, you may pay with cash, cashier' alf, your attorney may pay with a credit on, sign and attach the <i>Application for li</i>	s check, or money card or check with
						Official Form 103A).	on, sign and attach the Apphoalich for in	raividuale to r dy
			b a	ut is not req pplies to you	uired to, waive you ur family size and	ur fee, and may do so only if yo you are unable to pay the fee ir	n only if you are filing for Chapter 7. By our income is less than 150% of the offic n installments). If you choose this optior cial Form 103B) and file it with your peti	cial poverty line that n, you must fill out
9.		you filed for	■ No.					
		ruptcy within the 3 years?	☐ Yes.					
				District		When	Case number	
				District		144	O	
				District		When	Case number	
10.		any bankruptcy s pending or being	■ No					
	filed not f you,	by a spouse who is iling this case with or by a business ner, or by an	☐ Yes.					
				Debtor			Relationship to you	
				District		When	Case number, if known	
				Debtor			Relationship to you	
				District		When	Case number, if known	
11.		ou rent your lence?	■ No.	Go to li	ine 12.			
	16910	ielioe :	☐ Yes.	Has yo	ur landlord obtain	ed an eviction judgment agains	st you?	
					No. Go to line 12			
					Yes. Fill out <i>Initia</i> this bankruptcy p		Judgment Against You (Form 101A) an	d file it as part of

		Robert W Cobb Diane R Cobb			Case number (if known)
Part	3: Re	port About Any Bu	sinesses `	You Own as a Sole Propri	etor
12.		u a sole proprietor full- or part-time ss?	■ No.	Go to Part 4.	
			☐ Yes.	Name and location of bu	usiness
	busines an indiv separate as a cor	oroprietorship is a s you operate as idual, and is not a e legal entity such poration, ship, or LLC.		Name of business, if any	
	sole pro	ave more than one oprietorship, use a e sheet and attach		Number, Street, City, St	ate & ZIP Code
		petition.		Check the appropriate b	ox to describe your business:
				☐ Health Care Bus	iness (as defined in 11 U.S.C. § 101(27A))
				☐ Single Asset Re	al Estate (as defined in 11 U.S.C. § 101(51B))
				☐ Stockbroker (as	defined in 11 U.S.C. § 101(53A))
				-	ter (as defined in 11 U.S.C. § 101(6))
				■ None of the abo	ve
13.	Chapte Bankru	u filing under r 11 of the ptcy Code and are mall business	deadlines operation	s. If you indicate that you are	e court must know whether you are a small business debtor so that it can set appropriate a small business debtor, you must attach your most recent balance sheet, statement of federal income tax return or if any of these documents do not exist, follow the procedure
	For a de	efinition of s <i>mall</i>	■ No.	I am not filing under Cha	apter 11.
	busines	ss debtor, see 11 § 101(51D).	□ No.	I am filing under Chapte Code.	r 11, but I am NOT a small business debtor according to the definition in the Bankruptcy
			☐ Yes.	I am filing under Chapte	r 11 and I am a small business debtor according to the definition in the Bankruptcy Code.
Part	4: Re	port if You Own or	Have Any	Hazardous Property or A	ny Property That Needs Immediate Attention
14.		own or have any	■ No.		
	· · .	y that poses or is to pose a threat	☐ Yes.		
		inent and able hazard to		What is the hazard?	
	public l	health or safety?			
	propert	ou own any by that needs late attention?		If immediate attention is needed, why is it needed?	
	perisha livestoc	mple, do you own ble goods, or k that must be fed, lding that needs repairs?		Where is the property?	Number, Street, City, State & Zip Code
					,

	tor 2 Diane R Cobb	- Da	paging a Briefing About Cradit Counceling			Case	number (if known)
ar	Explain Your Efforts t		eceive a Briefing About Credit Counseling out Debtor 1:		Δh	out Del	btor 2 (Spouse Only in a Joint Case):
15.	Tell the court whether you have received a briefing about credit counseling.		u must check one: I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.			l must of the count this the count t	check one: eived a briefing from an approved credit seling agency within the 180 days before I filed bankruptcy petition, and I received a certificate of bletion.
	The law requires that you receive a briefing about credit counseling before		Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.				h a copy of the certificate and the payment plan, if that you developed with the agency.
	you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to		I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.			coun this b	eived a briefing from an approved credit seling agency within the 180 days before I filed pankruptcy petition, but I do not have a certificate mpletion.
	file. If you file anyway, the court can dismiss your case, you		Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.				n 14 days after you file this bankruptcy petition, you T file a copy of the certificate and payment plan, if
	will lose whatever filing fee you paid, and your creditors can begin collection activities again.		I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.			from those reque temp	ify that I asked for credit counseling services an approved agency, but was unable to obtain a services during the 7 days after I made my est, and exigent circumstances merit a 30-day orary waiver of the requirement.
			To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case. Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.			attach to obt before circur Your with y filed f	sk for a 30-day temporary waiver of the requirement, in a separate sheet explaining what efforts you made tain the briefing, why you were unable to obtain it e you filed for bankruptcy, and what exigent instances required you to file this case. case may be dismissed if the court is dissatisfied your reasons for not receiving a briefing before you or bankruptcy. court is satisfied with your reasons, you must still
			If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case			file a copy not do	we a briefing within 30 days after you file. You must certificate from the approved agency, along with a of the payment plan you developed, if any. If you do o so, your case may be dismissed.
			may be dismissed. Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15			•	extension of the 30-day deadline is granted only for e and is limited to a maximum of 15 days.
			days. I am not required to receive a briefing about credit counseling because of:				not required to receive a briefing about credit seling because of:
			Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.			 	Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.
			Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after reasonably tried to do so.	1		 	Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.
			Active duty. I am currently on active military duty in a military combat zone.			_	Active duty. I am currently on active military duty in a military combat zone.
			If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.			about	believe you are not required to receive a briefing t credit counseling, you must file a motion for waiver edit counseling with the court.

	otor 1 Robert W Cobb otor 2 Diane R Cobb			Case	number (if known)	
Par	t 6: Answer These Quest	ions for Re	eporting Purposes			
	What kind of debts do you have?	16a.			are defined in 11 U.S.C. § 101(8) as "incurr	ed by an
	•		☐ No. Go to line 16b.			
			Yes. Go to line 17.			
		16b.	Are your debts primarily busine money for a business or investme			
			☐ No. Go to line 16c.	ŭ i		
			☐ Yes. Go to line 17.			
		16c.	State the type of debts you owe the	nat are not consumer debts or l	business debts	
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter 7. G	o to line 18.		
	Do you estimate that after any exempt property is excluded and administrative expenses	■ Yes.	are paid that funds will be availab		npt property is excluded and administrative editors?	expenses
	are paid that funds will		■ No			
	be available for distribution to unsecured creditors?		Yes			
18.	How many Creditors do	1 -49		1 ,000-5,000	25,001-50,000	
	you estimate that you owe?	☐ 50-99		5001-10,000	5 0,001-100,000	
		☐ 100-19 ☐ 200-99		□ 10,001-25,000	☐ More than100,000	
19.	How much do you	□ \$0 - \$5	50,000	□ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion	
	estimate your assets to be worth?		01 - \$100,000	□ \$10,000,001 - \$50 million		
		. ,	001 - \$500,000	□ \$50,000,001 - \$100 millio □ \$100,000,001 - \$500 millio		ion
		□ \$500,0	001 - \$1 million	— \$100,000,001 - \$500 miiii	ion in More than \$50 billion	
20.	How much do you	□ \$0 - \$5	50,000	□ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion	
	estimate your liabilities to be?		01 - \$100,000	□ \$10,000,001 - \$50 million		
			001 - \$500,000	□ \$50,000,001 - \$100 millio □ \$100,000,001 - \$500 millio		llion
		□ \$500,0	001 - \$1 million	— \$100,000,001 - \$300 IIIIII	ion invole than \$50 billion	
Par	t 7: Sign Below					
For	you	I have exa	amined this petition, and I declare	under penalty of perjury that th	ne information provided is true and correct.	
					eligible, under Chapter 7, 11,12, or 13 of tit and I choose to proceed under Chapter 7.	le 11,
			ney represents me and I did not pa t, I have obtained and read the not		no is not an attorney to help me fill out this 2(b).	
		I request	relief in accordance with the chapt	er of title 11, United States Cod	de, specified in this petition.	
			cy case can result in fines up to \$2		noney or property by fraud in connection wi to 20 years, or both. 18 U.S.C. §§ 152, 13	
			ert W Cobb	/s/ Diane I	R Cobb	
		Robert \ Signature	W Cobb e of Debtor 1	Diane R C Signature of		
		Executed	on May 31, 2018 MM / DD / YYYY	Executed or	May 31, 2018 MM / DD / YYYY	

Debtor 1 Debtor 2	Robert W Cobb Diane R Cobb		Cas	e number (if known)
	attorney, if you are ted by one	under Chapter 7, 11, 12, or 13 of title 11, L	Inited States Code, and have e	informed the debtor(s) about eligibility to proceed explained the relief available under each chapter debtor(s) the notice required by 11 U.S.C. § 342(b)
	not represented by ey, you do not need s page.	and, in a case in which § 707(b)(4)(D) app schedules filed with the petition is incorrec		ledge after an inquiry that the information in the
	. •	/s/ Richard A. Jacoby, Esq.	Date	May 31, 2018
		Signature of Attorney for Debtor		MM / DD / YYYY
		Richard A. Jacoby, Esq.		
		Jacoby & Jacoby, Attorneys At Lav	•	
		Firm name	V	
		1737 North Ocean Avenue Medford, NY 11763		
		Number, Street, City, State & ZIP Code		
		Contact phone 631-289-4600	Email address	
		2585735 NY		
		Bar number & State		

Fill	n this information to identify your case:		
Deb	tor 1 Robert W Cobb		
	First Name Middle Name Last Name		
	tor 2 Diane R Cobb se if, filing) First Name Middle Name Last Name		
` '			
Unit	ed States Bankruptcy Court for the: EASTERN DISTRICT OF NEW YORK		
	e number		
(if kno	wn)		heck if this is an
		ar	nended filing
Sui Be a	icial Form 106Sum mmary of Your Assets and Liabilities and Certain Statistical Information s complete and accurate as possible. If two married people are filing together, both are equally responsible f mation. Fill out all of your schedules first; then complete the information on this form. If you are filing amend		
•	original forms, you must fill out a new <i>Summary</i> and check the box at the top of this page.		·
Part	1: Summarize Your Assets		
			ur assets ue of what you own
1.	Schedule A/B: Property (Official Form 106A/B)	•	271,190.00
	1a. Copy line 55, Total real estate, from Schedule A/B	\$ _	271,130.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$.	19,730.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	290,920.00
Part	2: Summarize Your Liabilities		
			ur liabilities ount you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)		•
۷.	2a. Copy the total you listed in Column A, <i>Amount of claim</i> , at the bottom of the last page of Part 1 of <i>Schedule D.</i>	\$	430,237.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)		
O.	3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of <i>Schedule E/F</i>	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	32,665.89
	Your total liabilities	\$	462,902.89
Part	3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I)		
4.	Copy your combined monthly income from line 12 of Schedule I	\$	4,880.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	4,894.00
Part	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur othe	r schedules.
7.	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	a perso	onal, family, or
	Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this the court with your other schedules.	s <i>box</i> ar	nd submit this form to

Official Form 106Sum Summa

Debtor 1 Debtor 2	Robert W Cobb Diane R Cobb	Case number (if known)	
	m the Statement of Your Current Monthly Income: Cop A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 L		\$ 1,850.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Tota	ıl claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$_	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$_	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$_	0.00
9d. Student loans. (Copy line 6f.)	\$_	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$_	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$_	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

Debtor 2 Diane R Cobb First Name	Deb	tor 1	Robert W Cobb			
United States Bankruptcy Court for the: EASTERN DISTRICT OF NEW YORK Case number Case number (if known). Case equally responsible for supplying correct to pour name and case number (if known). Ca		· <u>·</u>		Middle Name Last Name		
United States Bankruptcy Court for the: EASTERN DISTRICT OF NEW YORK Case number Check if this is amended filing Difficial Form 106A/B Schedule A/B: Property 12/15 12/1						
Case number Check if this is a manded filing	(Spoi	se, if filing) F	irst Name	Middle Name Last Name		
Difficial Form 106A/B Schedule A/B: Property 12/15	Unit	ed States Bankru	ptcy Court for the: EAST	ERN DISTRICT OF NEW YORK		
Reach category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where yo ink it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Inswer every question. Part I: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In	Cas	e number				
neach category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where yo hink it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Inswer every question. Part 1:						
The category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you ink it fits best. Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). In more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). In more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). In more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). In more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). In more space, it is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). In more space, it is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). In more space, write your name and case number (if known). In more space, write your name and case number (if known). In more space, write your name and case number (if known). In more space, write your name and case number (if known). In more space, write your name and case number (if known). In more space, write your name and case number (if known). In more space, write your name and case number (if known). In more space, write your name and case number (if known). In more space, write your name and case number (if known). In more space, write your name and case number (if known). In the case of the space, write your name and case number (if known). In the case of the space, write your name and case	_					
ink it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct formation. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). If work is the property? Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest in	3 0	hedule A	4/B: Propert	y		12/15
## Yes. Where is the property? ## What is the property? Check all that apply Single-family home						
Street address, if available, or other description Single-family home Duplex or multi-unit building Condominium or cooperative Duplex or mobile home Current value of the entire property? Check one Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this is community property Check one Check if this is community property Check one Check if this is community property Check one Check if this is community property Check if this is community Check if this is community property Check if this is communi		No. Go to Part 2				
Street address, if available, or other description Single-family home Duplex or multi-unit building Condominium or cooperative Duplex or mobile home Current value of the entire property? Check one Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this is community property Check one Check if this is community property Check one Check if this is community property Check one Check if this is community property Check if this is community Check if this is community property Check if this is communi		110. Co to 1 alt 2.				
Rocky Point NY 11778-0000 City State ZIP Code Investment property Timeshare Other Who has an interest in the property? Check one Debtor 1 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about this item, such as local Current value of the entire property? Current value of the entire property? S271,190.00 \$271,1	-		property?			
Rocky Point NY 11778-0000 City State ZIP Code Investment property Investment prop		Yes. Where is the	pad	Single-family home Duplex or multi-unit building	the amount of any secure	ed claims on Schedule D:
City State ZIP Code Investment property Timeshare Other Who has an interest in the property? Check one Debtor 1 only Suffolk County Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about this item, such as local \$271,190.00 \$271,190.00 \$271,190.00 \$271,190.00 \$271,190.00 \$271,190.00 \$271,190.00 \$271,190.00 County See simple, tenancy by the entireties, a life estate), if known. Tenancy By The Entirety Check if this is community property (see instructions)		Yes. Where is the	pad	Single-family home Duplex or multi-unit building Condominium or cooperative	the amount of any secure	ed claims on Schedule D:
Suffolk County Timeshare Other Other Other Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, a life estate), if known. Tenancy By The Entirety Debtor 1 only Tenancy By The Entirety Check if this is community property (see instructions) Other information you wish to add about this item, such as local		Yes. Where is the 8 East End Ro Street address, if avail	pad lable, or other description	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home	the amount of any secure Creditors Who Have Clair	ed claims on Schedule D: ms Secured by Property. Current value of the
Suffolk County Other Who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about this item, such as local (such as fee simple, tenancy by the entireties, a life estate), if known. Tenancy By The Entirety Check if this is community property (see instructions)		Yes. Where is the 8 East End Ro Street address, if avail	oad lable, or other description NY 11778-00	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land	the amount of any secure Creditors Who Have Clair Current value of the entire property?	d claims on Schedule D: ms Secured by Property. Current value of the portion you own?
Suffolk County Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about this item, such as local		Yes. Where is the 8 East End Ro Street address, if avail	oad lable, or other description NY 11778-00	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property	the amount of any secure Creditors Who Have Clair Current value of the entire property? \$271,190.00	current value of the portion you own? \$271,190.00
Suffolk County Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about this item, such as local		Yes. Where is the 8 East End Ro Street address, if avail	oad lable, or other description NY 11778-00	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other	Current value of the entire property? \$271,190.00 Describe the nature of y (such as fee simple, ter	Current value of the portion you own? \$271,190.00
At least one of the debtors and another Check if this is community property (see instructions) Other information you wish to add about this item, such as local		Yes. Where is the 8 East End Ro Street address, if avail	oad lable, or other description NY 11778-00	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one	Current value of the entire property? \$271,190.00 Describe the nature of y (such as fee simple, ter a life estate), if known.	Current value of the portion you own? \$271,190.00 your ownership interest lancy by the entireties, o
At least one of the debtors and another (see instructions) Other information you wish to add about this item, such as local		8 East End Ro Street address, if avail Rocky Point	oad lable, or other description NY 11778-00	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one Debtor 1 only	Current value of the entire property? \$271,190.00 Describe the nature of y (such as fee simple, ter a life estate), if known.	Current value of the portion you own? \$271,190.00 your ownership interest lancy by the entireties, o
·		8 East End Ro Street address, if avail Rocky Point City	oad lable, or other description NY 11778-00	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one Debtor 1 only Debtor 2 only	current value of the entire property? \$271,190.00 Describe the nature of y (such as fee simple, ter a life estate), if known. Tenancy By The E	Current value of the portion you own? \$271,190.00 your ownership interest nancy by the entireties, o
		8 East End Ro Street address, if avail Rocky Point City	oad lable, or other description NY 11778-00	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	the amount of any secure Creditors Who Have Clair Current value of the entire property? \$271,190.00 Describe the nature of y (such as fee simple, ter a life estate), if known. Tenancy By The E	Current value of the portion you own? \$271,190.00 your ownership interest nancy by the entireties, o
		8 East End Ro Street address, if avail Rocky Point City	oad lable, or other description NY 11778-00	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one Debtor 1 only Debtor 2 only At least one of the debtors and another Other information you wish to add about this it	the amount of any secure Creditors Who Have Clair Current value of the entire property? \$271,190.00 Describe the nature of y (such as fee simple, ter a life estate), if known. Tenancy By The E	Current value of the portion you own? \$271,190.00 your ownership interest nancy by the entireties, o

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

	otor 1 otor 2	Robert W Co				Case numb	er (if known)	
3. C	ars, va	ns, trucks, trac	tors, sport utility v	ehicles, motorcycles				
	l No							
	Yes							
3.1	l Make	e: Chevrole	et	Who has an interest in	the property? Check one			claims or exemptions. Put red claims on Schedule D:
	Mode	el: Camaro		Debtor 1 only				aims Secured by Property.
	Year	2010		Debtor 2 only		Curi	rent value of the	Current value of the
	Appr	oximate mileage:		■ Debtor 1 and Debtor	•		re property?	portion you own?
	Othe	r information:		At least one of the de	ebtors and another			
				Check if this is com	nmunity property		\$9,800.00	\$9,800.00
5 /				wn for all of your entries that number here				\$9,800.00
+	Jayes y	ou nave allacii	eu ioi Part 2. Write	that number here				<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>
Part	3: Des	scribe Your Perso	onal and Household I	tems				
Do	you ow	n or have any l	egal or equitable in	nterest in any of the follo	owing items?			Current value of the portion you own? Do not deduct secured claims or exemptions.
	E <i>xample</i> ☑ No	old goods and to see: Major appliar		s, china, kitchenware				
	100.	20001120						#2.000.00
			Household Go	ods				\$3,000.00
	No	es: Televisions a including cel		deo, stereo, and digital eq media players, games	uipment; computers, į	printers, scann	ers; music collec	tions; electronic devices
	☐ Yes.	Describe						
1	Example		I figurines; paintings ions, memorabilia, c	, prints, or other artwork; l ollectibles	books, pictures, or oth	ner art objects;	stamp, coin, or b	aseball card collections;
	■ No □ Yes.	Describe						
		ent for sports a es: Sports, photo musical instr	ographic, exercise, a	nd other hobby equipmer	nt; bicycles, pool table	es, golf clubs, s	kis; canoes and k	ayaks; carpentry tools;
		Describe						
10.	Firearn Examp		s, shotguns, ammun	nition, and related equipme	ent			
	■ No		-					
	☐ Yes.	Describe						

Debtor 1 Debtor 2	Diane R Cobb		Case number (if known)	1
_		urs, leather coats, desi	igner wear, shoes, accessories	
□ No				
■ Yes.	Describe			
	Cloth	nes		\$2,000.00
12. Jewel	rv			
		ostume jewelry, engag	gement rings, wedding rings, heirloom jewelry, watches, gems,	gold, silver
Yes.	Describe			
	Jewe	elry		\$800.00
	arm animals	orooo		
■ No	ples: Dogs, cats, birds, h	Jises		
	Describe			
14 Any o	ther personal and hous	ahald itama yay did .	not already list, including any health aids you did not list	
■ No	iner personal and nous	enola items you ala i	not already list, including any health alds you did not list	
	Give specific informatio	n		
	·			
15. Add	the dollar value of all of	f your entries from Pa	art 3, including any entries for pages you have attached	45.000.00
				\$5,800.00
Part 4: De	escribe Your Financial Ass	ets		
Do you o	wn or have any legal or	equitable interest in	any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
				μ
16. Cash Exam	ples: Money you have in	your wallet, in your ho	me, in a safe deposit box, and on hand when you file your petil	tion
■ No	,			
☐ Yes.				
17. Denos	sits of money			
	ples: Checking, savings,		unts; certificates of deposit; shares in credit unions, brokerage	houses, and other similar
□ No	institutions. If you h	ave multiple accounts	with the same institution, list each.	
			Institution name:	
. 00.		Checking &	Chase-Checking & Savings	
	17.1	. Savings	TFCU-Checking	\$130.00
			-	-
18 Bonds	s, mutual funds, or publ	icly traded stocks		
			kerage firms, money market accounts	
■ No				
☐ Yes.		Institution or issuer r	name:	
joint	ublicly traded stock and venture	d interests in incorpo	orated and unincorporated businesses, including an intere	st in an LLC, partnership, and
■ No	Chro on self-statement	n about the		
⊔ Yes.	. Give specific informatio N	n about themame of entity:	 % of ownership:	
		•	·	
Nego	tiable instruments include	personal checks, cast	tiable and non-negotiable instruments hiers' checks, promissory notes, and money orders. nsfer to someone by signing or delivering them.	

	ebtor 1 ebtor 2	Robert W Cobb Diane R Cobb	Case number (if known)	
	■ No			
		Give specific information about them		
		Issuer name:		
24	Detiron	ant ar nancian accounts		
21.		e nt or pension accounts /es: Interests in IRA, ERISA, Keogh, 401(k), 40	03(b), thrift savings accounts, or other pension or profit-sharing plan	ns
	■ No			
	☐ Yes. I	ist each account separately. Type of account:	Institution name:	
22	Coourit	deposits and prepayments		
	Your sl Examp	are of all unused deposits you have made so	that you may continue service or use from a company public utilities (electric, gas, water), telecommunications companies	, or others
	■ No		t was at	
	☐ Yes		Institution name or individual:	
	Annuiti ■ No	es (A contract for a periodic payment of money	y to you, either for life or for a number of years)	
	☐ Yes	Issuer name and description.		
	26 U.S.0	s in an education IRA, in an account in a qu c. §§ 530(b)(1), 529A(b), and 529(b)(1).	nalified ABLE program, or under a qualified state tuition progra	am.
	■ No	Lander de la casa de l	Our and the file the annual of a surfation of At II O O C 504(s)	
	☐ Yes		. Separately file the records of any interests.11 U.S.C. § 521(c):	
	Trusts, ■ No	equitable or future interests in property (ot	her than anything listed in line 1), and rights or powers exerci	sable for your benefit
	☐ Yes.	Give specific information about them		
	_Examp	, copyrights, trademarks, trade secrets, and les: Internet domain names, websites, proceed		
	■ No □ Yes.	Give specific information about them		
27.	License	es, franchises, and other general intangible	s	
	Examp ■ No	les: Building permits, exclusive licenses, coope	erative association holdings, liquor licenses, professional licenses	
	_	Give specific information about them		
Mo	oney or p	roperty owed to you?		Current value of the
				portion you own? Do not deduct secured claims or exemptions.
28.	Tax ref	unds owed to you		
	■ No	•		
	☐ Yes.	Give specific information about them, including	whether you already filed the returns and the tax years	
29.	Family Examp		upport, child support, maintenance, divorce settlement, property set	ttlement
	■ No			
	☐ Yes.	Give specific information		
	0.1			
	Examp	mounts someone owes you les: Unpaid wages, disability insurance payme benefits; unpaid loans you made to someo	nts, disability benefits, sick pay, vacation pay, workers' compensa	tion, Social Security
	■ No			
	☐ Yes.	Give specific information		

Debtor Debtor		Case number (if known)	
	erests in insurance policies ramples: Health, disability, or life insurance; health savings account (HSA);	credit, homeowner's, or renter's insurar	nce
	es. Name the insurance company of each policy and list its value. Company name:	Beneficiary:	Surrender or refund value:
If y	y interest in property that is due you from someone who has died you are the beneficiary of a living trust, expect proceeds from a life insurance meone has died.	e policy, or are currently entitled to rec	eive property because
■ N □ Y	lo 'es. Give specific information		
Ex ■ N	nims against third parties, whether or not you have filed a lawsuit or management amples: Accidents, employment disputes, insurance claims, or rights to sue low of the control of the con		
34. Oth	ner contingent and unliquidated claims of every nature, including coun	terclaims of the debtor and rights to	set off claims
Y	es. Describe each claim		
	FDCPA Actions		\$4,000.00
36. A	do /es. Give specific information dd the dollar value of all of your entries from Part 4, including any entror Part 4.	. • .	\$4,130.00
Part 5:	Describe Any Business-Related Property You Own or Have an Interest In. List	any real estate in Part 1.	
■ No	you own or have any legal or equitable interest in any business-related property of the control	?	
Part 6:	Describe Any Farm- and Commercial Fishing-Related Property You Own or Harlf you own or have an interest in farmland, list it in Part 1.	ve an Interest in.	
_	you own or have any legal or equitable interest in any farm- or comme No. Go to Part 7.	rcial fishing-related property?	
	Yes. Go to line 47.		
Part 7:	Describe All Property You Own or Have an Interest in That You Did Not Lie	st Above	
53. Do <i>Ex</i> ■ N	you have other property of any kind you did not already list? **amples: Season tickets, country club membership		
	es. Give specific information		
54. A	dd the dollar value of all of your entries from Part 7. Write that number	here	\$0.00

Debtor 1 Robert W Cobb Debtor 2 Diane R Cobb				Case number (if known)		
Part	8:	List the Totals of Each Part of this Form				
55.	Part 1	l: Total real estate, line 2				\$271,190.00
56.	Part 2	2: Total vehicles, line 5		\$9,800.00		
57.	Part 3	3: Total personal and household items, line 15		\$5,800.00		
58.	Part 4	1: Total financial assets, line 36		\$4,130.00		
59.	Part 5	5: Total business-related property, line 45		\$0.00		
60.	Part 6	6: Total farm- and fishing-related property, line 52		\$0.00		
61.	Part 7	7: Total other property not listed, line 54	+	\$0.00		
62.	Total	personal property. Add lines 56 through 61	_	\$19,730.00	Copy personal property total	\$19,730.00
63.	Total	of all property on Schedule A/B. Add line 55 + line 62				\$290,920.00

Fill	in this informa	ation to identify your ca	ise:			
Deb	otor 1	Robert W Cobb				
Dak	ntor O	First Name	Middle Name	L	ast Name	
l	otor 2 ouse if, filing)	Diane R Cobb First Name	Middle Name	L	ast Name	
Uni	ted States Ban	kruptcy Court for the:	EASTERN DISTRICT OF NE	EW Y	ORK	
	se number					☐ Check if this is an amended filing
	ficial For chedule	-	perty You Cla	im	as Exempt	4/16
the process the pr	oroperty you list ded, fill out and a number (if kno each item of poific dollar amapplicable state—may be un mption to a pa	ted on Schedule A/B: Pro attach to this page as mo own). roperty you claim as ex ount as exempt. Alternatutory limit. Some exen limited in dollar amour	operty (Official Form 106A/B) any copies of <i>Part 2: Addition</i> cempt, you must specify the atively, you may claim the f aptions—such as those for at. However, if you claim an	as yo nal Pa e amo ull fa heal exen	our source, list the property that you age as necessary. On the top of any ount of the exemption you claim. If market value of the property be the aids, rights to receive certain be notion of 100% of fair market value.	additional pages, write your name and One way of doing so is to state a ing exempted up to the amount of enefits, and tax-exempt retirement
		the Property You Clair	n as Exempt			
1.	Which set of e	exemptions are you cla	iming? Check one only, ever	n if yo	our spouse is filing with you.	
	☐ You are clai	ming state and federal n	onbankruptcy exemptions.	11 U.S	S.C. § 522(b)(3)	
	■ You are clai	ming federal exemptions	. 11 U.S.C. § 522(b)(2)			
2.	For any prope	erty you list on Schedul	e A/B that you claim as exe	mpt,	fill in the information below.	
		n of the property and line on at lists this property	Current value of the portion you own Copy the value from		ount of the exemption you claim eck only one box for each exemption.	Specific laws that allow exemption
			Schedule A/B	Crie	sek only one box for each exemption.	
	2010 Chevro		\$9,800.00		\$7,550.00	11 U.S.C. § 522(d)(2)
	Line nom Sche	edule AVB. 3.1			100% of fair market value, up to any applicable statutory limit	
	2010 Chevro		\$9,800.00		\$2,250.00	11 U.S.C. § 522(d)(5)
	Line nom com	Jaano 7 V D. 111			100% of fair market value, up to any applicable statutory limit	
	Household (\$3,000.00		\$3,000.00	11 U.S.C. § 522(d)(3)
					100% of fair market value, up to any applicable statutory limit	
	Clothes	adula A/D: 11 1	\$2,000.00		\$2,000.00	11 U.S.C. § 522(d)(3)

Official Form 106C

Jewelry

Line from Schedule A/B: 12.1

\$800.00

☐ 100% of fair market value, up to any applicable statutory limit

100% of fair market value, up to any applicable statutory limit

\$800.00

11 U.S.C. § 522(d)(4)

Debtor 1 Debtor 2	Robert W Cobb Diane R Cobb				
	description of the property and line on dule A/B that lists this property	Current value of the portion you own	e Amount of the exemption you claim		Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
	cking & Savings: se-Checking & Savings	\$130.00		\$130.00	11 U.S.C. § 522(d)(5)
TFC	trom Schedule A/B: 17.1		100% of fair market value, u any applicable statutory limi		
	PA Actions from Schedule A/B: 34.1	\$4,000.00		\$4,000.00	11 U.S.C. § 522(d)(5)
Line	Hom Schedule A/B. 34.1			100% of fair market value, up to any applicable statutory limit	
(Sub	you claiming a homestead exemption ject to adjustment on 4/01/19 and every No			led on or after the date of adjustmen	nt.)
	Yes. Did you acquire the property cover	red by the exemption wi	ithin 1	,215 days before you filed this case	?
	□ No				
	☐ Yes				

Fill in this informat	ion to identify you	ır case:				
Debtor 1	Robert W Cobb					
_	First Name		Name			
Debtor 2	Diane R Cobb					
(Spouse if, filing)	First Name	Middle Name Last	Name			
United States Bankr	uptcy Court for the	EASTERN DISTRICT OF NEW YOR	RK			
Case number(if known)					_	if this is an ded filing
Official Form [*] Schedule D		s Who Have Claims Sec	cured	by Property	/	12/15
		If two married people are filing together, bo out, number the entries, and attach it to this				
1. Do any creditors ha	ve claims secured by	y your property?				
☐ No. Check th	is box and submit t	his form to the court with your other sche	dules. You	u have nothing else to	report on this form.	
Yes. Fill in all	of the information	below.				
Part 1: List All S	ecured Claims					
for each claim. If more	than one creditor has	more than one secured claim, list the creditor s s a particular claim, list the other creditors in Pa cal order according to the creditor's name.		Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
Ocwen Loan	Servicing,	Describe the property that secures the cla	aim:	\$430,237.00	\$271,190.00	\$159,047.00
Creditor's Name		8 East End Road Rocky Point, N	Υ			
Attn: Research/Ba	ankruptov	11778 Suffolk County				
1661 Worthi		As of the date you file, the claim is: Check	all that			
Suite 100	3 ,	apply. Contingent				
West Palm E	Beach, FL	- Contingent				
33409	Ctata 9 Zin Cada	—				
Number, Street, City	y, State & Zip Code	☐ Unliquidated☐ Disputed				
Who owes the debt?	? Check one.	Nature of lien. Check all that apply.				
■ Debtor 1 only □ Debtor 2 only		☐ An agreement you made (such as mortgacar loan)	age or secu	red		
Debtor 1 and Debto	or 2 only	☐ Statutory lien (such as tax lien, mechanic	c's lien)			
☐ At least one of the o		☐ Judgment lien from a lawsuit	, c,			
☐ Check if this claim community debt	relates to a		tgage			
Date debt was incurre	Opened 05/05 Last Active 2/28/18	Last 4 digits of account number	9886			
Add the deller velve	of your optrice in C	Column A on this page Write that number by	oro:	¢420.22	7.00	
	=	column A on this page. Write that number he the dollar value totals from all pages.	ere:	\$430,23		
Write that number h		and an end of the state of the		\$430,23	7.00	

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Official Form 106D

Fill in	this informa	tion to identify your	case:					
Debto	or 1	Robert W Cobb						
		First Name	Middle Nan	ne	Last Name			
Debto	or 2	Diane R Cobb						
(Spouse	e if, filing)	First Name	Middle Nan	ne	Last Name			
United	d States Bank	ruptcy Court for the:	EASTERN DI	STRICT OF NE	W YORK			
Case (if know	number						_	Check if this is an Imended filing
Offic	ial Form	106F/F						
		: Creditors W	ho Have l	Jnsecure	d Claims			12/15
any exe Schedu Schedu left. Att	ecutory contracule G: Executor Lile D: Creditors	cts or unexpired leases ry Contracts and Unexp s Who Have Claims Sec luation Page to this pag	that could result ired Leases (Offi ured by Property	t in a claim. Also cial Form 106G). . If more space i	list executory of Do not include s needed, copy	contracts or any credito the Part you	editors with NONPRIORITY clands Schedule A/B: Property (Offic rs with partially secured claims an eed, fill it out, number the enhat Part. On the top of any additional secured claims and the results of the top of any additional secured claims.	ial Form 106A/B) and on that are listed in tries in the boxes on the
Part 1	List All o	of Your PRIORITY Un	secured Claim	ıs				
1. Do	o any creditors	have priority unsecure	d claims against	you?				
	No. Go to Part	2.						
	Yes.							
Part 2	List All o	of Your NONPRIORIT	Y Unsecured (Claims				
		have nonpriority unsec	_	•	th your other sch	edules.		
un tha	nsecured claim,	list the creditor separately	for each claim. F	or each claim list	ed, identify what	type of claim	n claim. If a creditor has more that it is. Do not list claims already indicately unsecured claims fill out the	cluded in Part 1. If more
								Total claim
4.1	All Island	Media	L	ast 4 digits of a	count number	3203		\$70.00
		reditor's Name		Vhen was the de		2017		
		od, NY 11717						_
		et City State Zlp Code	A	As of the date yo	u file, the claim	is: Check all	that apply	
	_	ed the debt? Check one.						
	☐ Debtor 1	•	Ι	☐ Contingent				
	Debtor 2	only	[☐ Unliquidated				
	Debtor 1	and Debtor 2 only	[☐ Disputed				
	☐ At least o	ne of the debtors and and	other 1	ype of NONPRIC	ORITY unsecure	d claim:		
	☐ Check if	this claim is for a comr	nunity [☐ Student loans				
	debt Is the claim	subject to offset?		☐ Obligations ariseport as priority cl		aration agree	ment or divorce that you did not	
	■ No		[Debts to pension	on or profit-sharir	ng plans, and	other similar debts	
	☐ Yes		ı	Other. Specify	Charge Ac	count		_

Debtor Debtor	1 Robert W Cobb 2 Diane R Cobb		Case number (if know)	
4.2	AT&T Wireless	Last 4 digits of account number	3359	\$244.94
	Nonpriority Creditor's Name PO Box 537113 Atlanta, GA 30353	When was the debt incurred?	2017	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other. Specify Utilities		
4.3	Bose	Last 4 digits of account number	5727	\$187.47
	Nonpriority Creditor's Name The Mountain Framingham, MA 01701-9168	When was the debt incurred?	2014	
	Number Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply	
	Who incurred the debt? Check one.			
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	No	☐ Debts to pension or profit-sharin		
	Yes	Other. Specify Charge Acc	count	
4.4	Capital One	Last 4 digits of account number	4539	\$11,102.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130	When was the debt incurred?	Opened 07/14 Last Active 10/05/17	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	□Yes	■ Other. Specify Credit Card	I	

Debtor Debtor	1 Robert W Cobb 2 Diane R Cobb		Case number (if know)	
4.5	Capital One	Last 4 digits of account number	4862	\$3,272.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130 Number Street City State Zlp Code	When was the debt incurred? As of the date you file, the claim	Opened 05/13 Last Active 10/09/17	,
	Who incurred the debt? Check one.	,		
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Credit Card		
4.6	Capital One Nonpriority Creditor's Name	Last 4 digits of account number	1168	\$758.00
	Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130	When was the debt incurred?	Opened 06/13 Last Active 10/09/17	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim		
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	\square Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing		
	Yes	Other. Specify Credit Card	<u> </u>	
4.7	Catholic Home Care Nonpriority Creditor's Name	Last 4 digits of account number	3967	\$30.00
	110 Bi-County Blvd. Suite 114 Farmingdale, NY 11735	When was the debt incurred?	2017	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	□ Debts to pension or profit-sharin	o plans, and other similar debts	
	□ Yes		g p	
	□ 162	Other. Specify Medical		

Debtor Debtor	1 Robert W Cobb 2 Diane R Cobb		Case number (if know)				
4.8	Citicards Nonpriority Creditor's Name	Last 4 digits of account number	7979	\$1,941.00			
	Citicorp Credit Services/Attn: Centraliz Po Box 790040 Saint Louis, MO 63179 Number Street City State Zlp Code	When was the debt incurred? As of the date you file, the claim i	Opened 05/16 Last Active 10/02/17				
	Who incurred the debt? Check one.						
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a sepa report as priority claims	aration agreement or divorce that you did not				
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts				
	☐ Yes	Other Specify Credit Card					
4.9	Comenitybank/venus	Last 4 digits of account number	5212	\$330.00			
	Nonpriority Creditor's Name Attn: Bankruptcy Dept Po Box 182125 Columbus, OH 43218	When was the debt incurred?	Opened 03/16 Last Active 10/06/17				
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	As of the date you file, the claim is: Check all that apply				
	☐ Debtor 1 only	☐ Contingent					
	■ Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharing					
	Yes	Other. Specify Charge Acc	count				
4.1	Credit One Bank Nonpriority Creditor's Name	Last 4 digits of account number	5097	\$2,217.00			
	Attn: Bankruptcy Po Box 98873 Las Vegas, NV 89193	When was the debt incurred?	Opened 02/14 Last Active 10/09/17				
	Number Street City State ZIp Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply				
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	☐ Disputed					
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a sepa report as priority claims	aration agreement or divorce that you did not				
	No	Debts to pension or profit-sharin	g plans, and other similar debts				
	☐ Yes	■ Other. Specify Credit Card					
		- Other opening					

Debtoi Debtoi	r1 Robert W Cobb r2 Diane R Cobb		Case number (if know)	
4.1	Credit One Bank	Last 4 digits of account number	3482	\$1,786.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 98873 Las Vegas, NV 89193 Number Street City State Zlp Code	When was the debt incurred? As of the date you file, the claim	Opened 04/14 Last Active 10/09/17 s: Check all that apply	
	Who incurred the debt? Check one. ☐ Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other Specify Credit Card		
4.1	Credit One Bank Nonpriority Creditor's Name	Last 4 digits of account number	9362	\$983.00
	Attn: Bankruptcy Po Box 98873 Las Vegas, NV 89193	When was the debt incurred?	Opened 03/16 Last Active 10/09/17	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Credit Card	<u> </u>	
4.1	Credit One Bank Nonpriority Creditor's Name	Last 4 digits of account number	9644	\$979.00
	Attn: Bankruptcy Po Box 98873 Las Vegas, NV 89193	When was the debt incurred?	Opened 03/16 Last Active 10/09/17	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt	☐ Student loans	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	·	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	□Yes	Other Specify Credit Card	1	

Debt Debt	or 1 Robert W Cobb or 2 Diane R Cobb		Case number (if know)			
4.1 4	Discover Financial	Last 4 digits of account number	1448	\$1,329.00		
	Nonpriority Creditor's Name	_	One and 00/44 Least Active			
	Po Box 3025 New Albany, OH 43054	When was the debt incurred?	Opened 02/14 Last Active 10/09/17			
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply			
	☐ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	■ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
	☐ Check if this claim is for a community debt	☐ Student loans				
	Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts			
	Yes	■ Other. Specify Credit Card	<u> </u>			
4.1 5	Fingerhut	Last 4 digits of account number	1107	\$517.00		
<u> </u>	Nonpriority Creditor's Name Bankruptcy Dept 6250 Ridgewood Rd	When was the debt incurred?	Opened 11/15 Last Active 9/17/17			
	Saint Cloud, MN 56303		<u> </u>			
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply			
	☐ Debtor 1 only	☐ Contingent				
	■ Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	 ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts 				
	■ No					
	Yes	■ Other. Specify Charge Acc	count			
4.1 6	First Premier Bank	Last 4 digits of account number	2312	\$1,003.00		
	Nonpriority Creditor's Name Po Box 5524	When was the debt incurred?	Opened 01/14 Last Active 10/09/17			
	Sioux Falls, SD 57117 Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply			
	Who incurred the debt? Check one. ☐ Debtor 1 only	П Ozzatia zazat				
	■ Debtor 2 only	☐ Contingent☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Unilquidated ☐ Disputed				
	☐ At least one of the debtors and another Type of NONPRIORITY unsecure		d claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt	_	ration agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims	,			
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts			
	Yes	Other, Specify Credit Card	I			

Debt Debt	or 1 Robert W Cobb or 2 Diane R Cobb		Case number (if know)	
4.1 7	First Premier Bank Nonpriority Creditor's Name	Last 4 digits of account number	8327	\$636.00
	Po Box 5524 Sioux Falls, SD 57117	When was the debt incurred?	Opened 02/15 Last Active 10/03/17	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ The state of the st	☐ Contingent ☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecure	d claim:	
	☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset?	Student loans	aration agreement or divorce that you did not	
	■ No □ Yes	☐ Debts to pension or profit-sharin ☐ Other. Specify Credit Card	,	
4.1 8	First Premier Bank Nonpriority Creditor's Name	Last 4 digits of account number	1608	\$486.00
	Po Box 5524 Sioux Falls, SD 57117	When was the debt incurred?	Opened 03/18 Last Active 5/22/18	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharin		
	Yes	■ Other. Specify Credit Card		
4.1 9	General Surgery Assoc. Nonpriority Creditor's Name	Last 4 digits of account number	3199	\$138.55
	226 Belle Meade Rd. Suite C	When was the debt incurred?	2017	
	East Setauket, NY 11733 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community debt		rration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Medical		

Debto	or 1 Robert W Cobb Diane R Cobb		Case number (if know)	
4.2 0	It Cosmetics	Last 4 digits of account number	8917	\$43.94
	Nonpriority Creditor's Name PO Box 2003 Harlan, IA 51593 Number Street City State Zlp Code	When was the debt incurred? As of the date you file, the claim	2017 is: Check all that apply	
	Who incurred the debt? Check one. ☐ Debtor 1 only			
	Debtor 2 only	☐ Contingent ☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Uniliquidated ☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Charge Acc	count	
4.2 1	John T. Mather Mem Hosp.	Last 4 digits of account number	8301	\$200.00
	Nonpriority Creditor's Name Attn: Patient Accounts 75 North Country Road	When was the debt incurred?	11/14/16	
	Port Jefferson, NY 11777 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured ☐ Student loans	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	_	aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Medical		
4.2	V. I. (0. 1). I.		4000	40.404.00
2	Kohls/Capital One Nonpriority Creditor's Name	Last 4 digits of account number	1623	\$2,481.00
	Kohls Credit Po Box 3120	When was the debt incurred?	Opened 04/16 Last Active 11/08/17	
	Milwaukee, WI 53201 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	tration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	□Yes	Other Specify Charge Acc	count	

Debto Debto	r 1 Robert W Cobb r 2 Diane R Cobb		Case number (if know)	
4.2	Midnight Velvet	Last 4 digits of account number	1550	\$46.00
	Nonpriority Creditor's Name Attn: Bankruptcy 1112 7th Ave Monroe, WI 53566 Number Street City State Zlp Code	When was the debt incurred? As of the date you file, the claim	Opened 03/14 Last Active 6/20/14 is: Check all that apply	
	Who incurred the debt? Check one.	•	,	
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Charge Acc	count	
4.2	Miles Kimball	Last 4 digits of account number	8507	\$18.11
	Nonpriority Creditor's Name P.O. Box 2860 Monroe, WI 53566	When was the debt incurred?	2017	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin	a plans, and other similar debts	
	☐ Yes	Other. Specify Credit Card		
4.2 5	Publishing Clearing House	Last 4 digits of account number	3027	\$69.54
	Nonpriority Creditor's Name 382 Channel Drive Port Washington, NY 11050	When was the debt incurred?	2017	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt		aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	a plane, and other circles delta	
	■ No	Debts to pension or profit-sharin		
	Yes	■ Other. Specify Charge Acc	count	

Debto Debto	or 1 Robert W Cobb Diane R Cobb		Case number (if know)	
4.2 6	Stony Brook Orthopaedic A	Last 4 digits of account number	3892	\$40.00
,	Nonpriority Creditor's Name Allied Rehab Med Service 14 Technology Dr Suite 12 East Setauket, NY 11733	When was the debt incurred?	2017	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Medical		
4.2 7	Stony Brook University Ho	Last 4 digits of account number	7568	\$350.00
	Nonpriority Creditor's Name PO Box 29320	When was the debt incurred?	0/47	
	New York, NY 10087-9320 Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Medical		
4.2	Syncb/Toys R Us Nonpriority Creditor's Name	Last 4 digits of account number	0828	\$677.00
	Attn: Bankruptcy Po Box 965060 Orlando, FL 32896	When was the debt incurred?	Opened 11/15 Last Active 9/04/17	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	■ Debtor 2 only			
	_	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured	d claim:	
		Student loans		
	☐ Check if this claim is for a community debt	<u></u>	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	agreement or arrefue that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐Yes	■ Other, Specify Charge Acc	count	

Debto	or 1 Robert W Cobb Diane R Cobb		Case number (if know)	
4.2 9	Tbom/atls/fortiva Mc	Last 4 digits of account number	4361	\$545.00
	Nonpriority Creditor's Name 5 Concourse Pkwy Atlanta, GA 30328	When was the debt incurred?	Opened 06/17 Last Active 10/09/17	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only	☐ Contingent☐ Unliquidated☐ Disputed		
	☐ At least one of the debtors and another☐ Check if this claim is for a community debt		d claim: Iration agreement or divorce that you did not	
	Is the claim subject to offset? ■ No	report as priority claims Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	■ Other. Specify Credit Card	l	
4.3	ValuePay Nonpriority Creditor's Name	Last 4 digits of account number	2430	\$43.52
	9550 Regency Square Blvd Suite 500	When was the debt incurred?	5/5/17	
	Jacksonville, FL 32225 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing		
	Yes	Other. Specify Charge Acc	count	
4.3 1	Wen Hair Care Nonpriority Creditor's Name	Last 4 digits of account number	8209	\$101.82
	41-550 Eclectic Street Suite 200	When was the debt incurred?	2017	
	Palm Desert, CA 92260 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa	aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	and the state of t	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	■ Other. Specify Charge Acc	count	

Debtor 2	Robert W Cobb Diane R Cobb		Case number (if know)	
4.3	Zwanger-Pesiri Radiology	Last 4 digits of account number	6560	\$40.00
	Nonpriority Creditor's Name 150 East Sunrise Hwy Suite 201	When was the debt incurred?	8/18/17	_
	Lindenhurst, NY 11757 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another☐ Check if this claim is for a community debt	Type of NONPRIORITY unsecure		
	Is the claim subject to offset?	report as priority claims	paration agreement or divorce that you did not	
	■ No	Debts to pension or profit-shari	ing plans, and other similar debts	
	☐ Yes	Other Specify Medical		_
Part 3:	List Others to Be Notified About a D	Acht That You Already Listed		
5. Use thi is tryin have n	is page only if you have others to be notified by to collect from you for a debt you owe to nore than one creditor for any of the debts to d for any debts in Parts 1 or 2, do not fill out	d about your bankruptcy, for a debt that someone else, list the original creditor i hat you listed in Parts 1 or 2, list the adc	n Parts 1 or 2, then list the collection agend	cy here. Similarly, if you
	d Address	On which entry in Part 1 or Part 2 did yo		
	ified Consultants ox 551268	_	Part 1: Creditors with Priority Unsecured Cla	
_	onville, FL 32255-1268		Part 2: Creditors with Nonpriority Unsecured	I Claims
	•	Last 4 digits of account number		
Evine	d Address x 390913		Part 1: Creditors with Priority Unsecured Cla	
	apolis, MN 55439	Last 4 digits of account number	Part 2: Creditors with Nonpriority Unsecured	l Claims
Nome on	d Address	On which entry in Port 1 or Port 2 did yo	u list the original graditor?	
	ational Recovery	On which entry in Part 1 or Part 2 did you Line 4.21 of (<i>Check one</i>):	\square Part 1: Creditors with Priority Unsecured Cla	aims
P.O. B	· · · · · · · · · · · · · · · · · · ·		Part 2: Creditors with Nonpriority Unsecured	
Nesco	nset, NY 11767	Last 4 digits of account number	. ,	
-		<u> </u>		
	d Address Shore Agency	On which entry in Part 1 or Part 2 did you Line 4.25 of (<i>Check one</i>):	u list the original creditor? \Box Part 1: Creditors with Priority Unsecured Cla	aimo
	agnoli Rd		Part 2: Creditors with Nonpriority Unsecured	
Ste 11	0 _	•	- Part 2: Creditors with Nonphority Onsecured	I Claims
Melvill	e, NY 11747	Last 4 digits of account number		
Name an	nd Address	On which entry in Part 1 or Part 2 did yo	u list the original creditor?	
	Shore Agency		Part 1: Creditors with Priority Unsecured Cla	aims
	pagnoli Rd		Part 2: Creditors with Nonpriority Unsecured	d Claims
Ste 11	u e, NY 11747			
WCIVIII	C, NT 11747	Last 4 digits of account number		
Name an	nd Address	On which entry in Part 1 or Part 2 did yo	u list the original creditor?	
The Le	vinbrook Law Firm		☐ Part 1: Creditors with Priority Unsecured Cla	aims
	ay Drive		Part 2: Creditors with Nonpriority Unsecured	
Suite (auge, NY 11788			
ιιαυμμ	aago, 141 11700	Last 4 digits of account number		
Name an	nd Address	On which entry in Part 1 or Part 2 did you	u list the original creditor?	
	and Address On which entry in Part 1 or Part 2 did you list the original creditor? Sworld Systems Inc Line 4.26 of (Check one):			

Debtor 1 Robert W Cobb Debtor 2 Diane R Cobb	Case number (if know)
Po Box 15618 Wilmingotn, DE 19850	Part 2: Creditors with Nonpriority Unsecured Claims
.	Last 4 digits of account number
Name and Address	On which entry in Part 1 or Part 2 did you list the original creditor?
Vengroff Williams Inc	Line 4.32 of (<i>Check one</i>): ☐ Part 1: Creditors with Priority Unsecured Claims
PO Box 4155 Sarasota, FL 34230	Part 2: Creditors with Nonpriority Unsecured Claims
3a1a50ta, FL 34230	Last 4 digits of account number

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

					Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total					
claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ ———	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
					Total Claim
	6f.	Student loans	6f.	\$	0.00
Total claims					
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	32,665.89
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	32,665.89

Fill in this infor	mation to identify your	case:		
Debtor 1	Robert W Cobb			
	First Name	Middle Name	Last Name	
Debtor 2	Diane R Cobb			
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT C	F NEW YORK	
Case number				
(if known)				Check if this is an
				amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with Name, Number	whom you have the , Street, City, State and ZIP	e contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.2					
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	_
2.3	<u> </u>		0.0.0	2 0000	
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	_
2.4					
	Name				<u> </u>
	Number	Street			<u> </u>
	City		State	ZIP Code	_
2.5	,				
	Name				_
	Number	Street			_
	City		State	ZIP Code	_

Official Form 106G

Fill in this in	formation to identify your	case:			
Debtor 1	Robert W Cobb				
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	Diane R Cobb First Name	Middle Name	Last Name		
(Spouse II, IIIIIIg)	FIISUNAINE	Middle Name	Last Name		
United States	Bankruptcy Court for the:	EASTERN DISTRICT	OF NEW YORK		
Case number	r				
(if known)				—	if this is an
				amend	ded filing
Official I	Form 106H				
		- l- 4			
Scheau	le H: Your Cod	eptors			12/15
ill it out, and our name ar	number the entries in the nd case number (if known	boxes on the left. Attac). Answer every question	h the Additional Page t n.	ion. If more space is needed, copy the othis page. On the top of any Addition	
1. Do yo	u have any codebtors? (If	you are filing a joint case,	do not list either spouse	as a codebtor.	
■ No					
☐ Yes					
Arizona, No. Go	n the last 8 years, have you California, Idaho, Louisiana o to line 3. Did your spouse, former spo	, Nevada, New Mexico, P	uerto Rico, Texas, Wash	y? (Community property states and territongton, and Wisconsin.)	ories include
in line 2 Form 10 out Colu	again as a codebtor only 6D), Schedule E/F (Officia	if that person is a guarai	ntor or cosigner. Make	if your spouse is filing with you. List the sure you have listed the creditor on Sc 6G). Use Schedule D, Schedule E/F, or	hedule D (Official Schedule G to fil
	ne, Number, Street, City, State and Z	IP Code		Column 2: The creditor to whom you Check all schedules that apply:	ou owe the dept
21				□ Schodulo D. line	
3.1 Nar	me			□ Schedule D, line □ Schedule E/F, line	
				☐ Schedule G, line	
Nur City	mber Street	State	ZIP Code		
2.2				Ochodala D. Para	
3.2 Nar	me			Schedule D, line	
				☐ Schedule E/F, line	
Nur City	mber Street	State	ZIP Code		
Jily	•				

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Fill	in this information to identify your	case:				I			
	otor 1 Robert W								
_	otor 2 Diane R Co	obb							
Uni	ted States Bankruptcy Court for tl	ne: EASTERN DISTRICT	OF NEW YORK						
(If kr	se number		-				ed filing ent showi	ng postpetition following date:	
	fficial Form 106l					MM / DD/	YYYY		
S	chedule I: Your Inc	come							12/15
spo atta	plying correct information. If youse. If you are separated and you are separated and you are separated to this form t1: Describe Employment information.	our spouse is not filing w . On the top of any additi	ith you, do not inclu	de infor	mati	on about your sp I case number (if	ouse. If m known).	nore space is	needed,
			☐ Employed			☐ Emp		g openee	
	If you have more than one job, attach a separate page with information about additional	Employment status	■ Not employed		■ Not employed				
	employers.	Occupation	Retired			Retire	d c		
	Include part-time, seasonal, or self-employed work.	Employer's name							
	Occupation may include studen or homemaker, if it applies.	t Employer's address							
		How long employed t	here?						
Par	t 2: Give Details About M	onthly Income							
	mate monthly income as of the use unless you are separated.	date you file this form. If	you have nothing to r	eport for	any	line, write \$0 in the	e space. Ir	nclude your noi	n-filing
-	u or your non-filing spouse have a e space, attach a separate sheet		ombine the informatio	n for all e	empl	oyers for that pers	on on the	lines below. If	you need
						For Debtor 1		ebtor 2 or ling spouse	
2.	List monthly gross wages, sa deductions). If not paid monthly			2.	\$	0.00	\$	0.00	
3.	Estimate and list monthly over	rtime pay.		3.	+\$	0.00	+\$	0.00	
4.	Calculate gross Income. Add	line 2 + line 3.		4.	\$	0.00	\$	0.00	

Official Form 106I Schedule I: Your Income page 1

Deb Deb	tor 1 tor 2	Robert W Cobb Diane R Cobb			Case	e number (<i>if kno</i> v	vn) _			
					Fo	r Debtor 1		For Debtor		
	Cop	by line 4 here	4	l.	\$_	0.0	00	\$	0.00	_
5.	List	t all payroll deductions:								
	5a.	Tax, Medicare, and Social Security deduction	ons 5	ā.	\$	0.0	00	\$	0.00	
	5b.	Mandatory contributions for retirement plan	ns 5	b.	\$	0.0	00	\$	0.00	_
	5c.	Voluntary contributions for retirement plan	s 5	c.	\$	0.0	00	\$	0.00	_
	5d.	Required repayments of retirement fund loa	ans 5	īd.	\$_	0.0	00	\$	0.00	_
	5e.	Insurance		e.	\$_	0.0		\$	0.00	_
	5f.	Domestic support obligations		of.	\$_	0.0		\$	0.00	_
	5g.	Union dues		g.	\$_	0.0		\$	0.00	_
	5h.	Other deductions. Specify:	5	sh.+	\$_	0.0	90 +	· \$	0.00	_
6.	Add	d the payroll deductions. Add lines 5a+5b+5c+	5d+5e+5f+5g+5h. 6	6.	\$_	0.0	00	\$	0.00	_
7.	Cald	culate total monthly take-home pay. Subtract I	line 6 from line 4. 7	7 .	\$_	0.0	00	\$	0.00	_
8.	List 8a.	t all other income regularly received: Net income from rental property and from oprofession, or farm Attach a statement for each property and busin receipts, ordinary and necessary business expmonthly net income.	ness showing gross penses, and the total	Ba.	\$	1,400.0	00	\$	0.00	
	8b.			ßb.	\$	0.0		\$	0.00	_
	8c.	Family support payments that you, a non-fi regularly receive Include alimony, spousal support, child suppor settlement, and property settlement. Unemployment compensation	ling spouse, or a dependent rt, maintenance, divorce	3c. 3d.	\$_ \$_	0.0	00	\$ 	0.00	_
	8e.			Be.	\$	1,900.0		·	,130.00	
	8f. 8g.	Other government assistance that you regulated cash assistance and the value (if know that you receive, such as food stamps (benefit Nutrition Assistance Program) or housing subspecify: Pension or retirement income	ularly receive yn) of any non-cash assistance is under the Supplemental sidies. 8	ßf. ßg.	\$_ \$_	0.0 450.0	00	\$\$	0.00	_
	8h.	Other monthly income. Specify:		3h.+	\$		00 +	\$	0.00	_
9.	Add	d all other income. Add lines 8a+8b+8c+8d+8e+	+8f+8g+8h. 9). [\$	3,750.0	00	\$	1,130.0	0
10.		culate monthly income. Add line 7 + line 9. If the entries in line 10 for Debtor 1 and Debtor 2 co	10. or non-filing spouse.	\$_		3,750.00 +	\$_	1,130.00	= \$	4,880.00
11.	Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.00									
12.		d the amount in the last column of line 10 to the te that amount on the Summary of Schedules and lies							\$	4,880.00
									Combi	ned ly income
13.	Do y	you expect an increase or decrease within the No.	e year after you file this form?							.,
		Yes. Explain:								

Official Form 106I Schedule I: Your Income page 2

Fill	in this informa	tion to identify yo	ur case:									
Deb	tor 1	Robert W Co	bb			Ch	eck if this is	s:				
	Debtor 2 (Spouse, if filing) Diane R Cobb						 ☐ An amended filing ☐ A supplement showing postpetition chapter 13 expenses as of the following date: 					
``		ruptcy Court for the:	: EASTEI	RN DISTRICT OF NEW YO	ORK		MM / DD	/ YYYY				
		aptoy count for the.	27.0121	W BIOTHOT OF HEW P				,				
1	e number nown)											
Of	fficial Fo	rm 106J										
So	chedule	J: Your E	Expen	ises					12/1			
Be info	as complete a	and accurate as	possible. eded, atta	If two married people are								
Par	t 1: Descr	ibe Your House	hold									
1.	□ No. Go to											
	_	s Debtor 2 live i	n a separa	ate household?								
	■ N		•									
		_	t file Officia	al Form 106J-2, <i>Expense</i> s	for Separate House	ehold of De	ebtor 2.					
2.	Do you have	e dependents?	■ No									
	Do not list Do Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relati Debtor 1 or Debtor		Depe age	ndent's	Does dependent live with you?			
	Do not state								□ No			
	dependents	names.							☐ Yes ☐ No			
									☐ Yes			
					-				□ No			
									Yes			
									□ No □ Yes			
3.	Do your exp	enses include		No					□ res			
		f people other th d your depender	nan $_{\square}$	Yes								
exp	imate your ex		our bankru	y Expenses uptcy filing date unless y y is filed. If this is a supp								
the		n assistance and		government assistance if luded it on <i>Schedule I: Y</i>				Your exp	enses			
4.		or home ownershind any rent for the		ses for your residence. In r lot.	nclude first mortgage	e 4.	\$		2,564.00			
	If not includ	led in line 4:										
	4a. Real e	estate taxes				4a.	\$		0.00			
		rty, homeowner's				4b.			0.00			
		maintenance, re owner's associati				4c. 4d.			100.00			
5.				our residence, such as hor	me equity loans	4u. 5.	·		0.00			

		Robert V Diane R		Case number (if known)				
6.	Utilitie	es:						
			heat, natural gas	6a.	\$	400.00		
	6b.	Water, sev	wer, garbage collection	6b.	\$	50.00		
	6c.	Telephone	e, cell phone, Internet, satellite, and cable services	6c.	\$	300.00		
	6d.	Other. Spe	ecify:	6d.	\$	0.00		
7.	Food	and house	ekeeping supplies		\$	350.00		
8.	Childe	care and c	hildren's education costs	8.	\$	0.00		
9.	Clothi	ing, laund	ry, and dry cleaning	9.	\$	200.00		
10.	Perso	onal care p	roducts and services	10.	\$	100.00		
11.			ntal expenses	11.	\$	200.00		
12.			Include gas, maintenance, bus or train fare.	40	Φ.	250.00		
40			ar payments.	12.	·			
			clubs, recreation, newspapers, magazines, and books	13.		150.00		
			ributions and religious donations	14.	\$	50.00		
15.	Insura		auranee deducted from your pay or included in lines 4 or 20					
		Life insura	surance deducted from your pay or included in lines 4 or 20.	15a.	\$	0.00		
		Health ins		15b.	*	0.00		
		Vehicle ins		15c.	*	180.00		
			rance. Specify:	15d.		0.00		
16			clude taxes deducted from your pay or included in lines 4 or 20.		Ψ	0.00		
10.	Specif		cidde taxes deducted from your pay or included in lines 4 or 20.	16.	\$	0.00		
17.			ease payments:		<u> </u>			
			ents for Vehicle 1	17a.	\$	0.00		
	17b.	Car payme	ents for Vehicle 2	17b.	\$	0.00		
	17c.	Other. Spe	ecify:	17c.	\$	0.00		
	17d.	Other. Spe	ecify:	17d.	\$	0.00		
18.	Your	payments	of alimony, maintenance, and support that you did not report as		_			
			your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	·	0.00		
19.			s you make to support others who do not live with you.		\$	0.00		
	Specif			19.				
20.			erty expenses not included in lines 4 or 5 of this form or on Sche			0.00		
			s on other property	20a.	· -	0.00		
		Real estat		20b.	· · · · · · · · · · · · · · · · · · ·	0.00		
			nomeowner's, or renter's insurance	20c.	·	0.00		
			nce, repair, and upkeep expenses	20d.	· -	0.00		
0.4			er's association or condominium dues	20e.	·	0.00		
21.	Otner	: Specify:		21.	+\$	0.00		
22.	Calcu	ılate your ı	monthly expenses					
	22a. A	Add lines 4	through 21.		\$	4,894.00		
	22b. C	Copy line 2	2 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	· · · · · ·		
			a and 22b. The result is your monthly expenses.		s ———	4,894.00		
			, , ,			4,004.00		
23.		-	monthly net income.		_			
			12 (your combined monthly income) from Schedule I.	23a.		4,880.00		
	23b.	Copy your	monthly expenses from line 22c above.	23b.	-\$	4,894.00		
	00-	Ch.t 4						
			our monthly expenses from your monthly income. is your <i>monthly net income</i> .	23c.	\$	-14.00		
		THE TESUIL	is your monthly het income.	_00.				
24.	Do yo	u expect a	an increase or decrease in your expenses within the year after yo	ou file this	form?			
For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a								
			terms of your mortgage?					
	■ No							
	☐ Ye	s.	Explain here:					

Fill in this inform	nation to identify your	case:					
Debtor 1	Robert W Cobb						
	First Name	Middle Name	Last	Name		•	
Debtor 2	Diane R Cobb	AC. 1 II. A.					
(Spouse if, filing)	First Name	Middle Name	Last	Name			
United States Bar	kruptcy Court for the:	EASTERN DISTRICT	OF NEW YOR	RK			
Case number							Check if this is an amended filing
Official Form Declarati		ın Individua	l Debto	or's	Schedules	3	12/15
f two married peo	ople are filing togethe	r, both are equally resp	onsible for su	ıpplyir	ng correct information		
obtaining money years, or both. 18	You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Sign Below						
Did you pay ■ No	or agree to pay some	one who is NOT an atto	orney to help	you fil	l out bankruptcy form	s?	
☐ Yes. Na	Yes. Name of person Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)						
	ty of perjury, I declare true and correct.	that I have read the su	mmary and so	chedul	es filed with this decla	aration and	
X /s/ Robe	ert W Cobb		Х	/s/ Di	ane R Cobb		
	W Cobb				e R Cobb		
Signature	e of Debtor 1			Signat	ture of Debtor 2		
Date M	lay 31, 2018			Date	May 31, 2018		

Fill	l in this infor	mation to identify you	r case:			
De	btor 1	Robert W Cobb				
_		First Name	Middle Name	Last Name		
	btor 2 ouse if, filing)	Diane R Cobb First Name	Middle Name	Last Name		
Un	ited States Ba	ankruptcy Court for the:	EASTERN DISTRICT O	F NEW YORK		
	se number nown)					Check if this is an amended filing
St	atemen			duals Filing for B		4/10
info	rmation. If r		attach a separate sheet to	o this form. On the top of an		
Pa	rt 1: Give	Details About Your Ma	arital Status and Where Yo	u Lived Before		
1.	What is vou	ur current marital statu	ıs?			
	■ Married Not ma					
2.	During the	last 3 years, have you	lived anywhere other than	n where you live now?		
	■ No					
	☐ Yes. Li	st all of the places you I	ived in the last 3 years. Do	not include where you live nov	٧.	
	Debtor 1 P	rior Address:	Dates Debtor lived there	1 Debtor 2 Prior Ac	ldress:	Dates Debtor 2 lived there
3. stat				egal equivalent in a commur evada, New Mexico, Puerto R		
	■ No □ Yes. M	lake sure you fill out <i>Scl</i>	nedule H: Your Codebtors (Official Form 106H).		
Pa	rt 2 Expla	ain the Sources of You	r Income			
4.	Fill in the tot	tal amount of income yo	u received from all jobs and	ing a business during this you all businesses, including part ve together, list it only once ur	-time activities.	alendar years?
	■ No	ill in the details.				
	— 163. F1	iii iii uo uotalis.	Deliterat		Dalatana	
			Debtor 1 Sources of income	Gross income	Debtor 2 Sources of income	Gross income
			Check all that apply.	(before deductions and exclusions)	Check all that apply.	(before deductions and exclusions)

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Official Form 107

	btor 1 btor 2		rt W Co					Ca	ise number (if known	·	
5.	Include and ot	e incom her pub	e regard lic benef	less of wheth it payments;	ner that inco pensions; re	me is taxable. Ex ental income; inte	xamples o erest; divi	us calendar years of other income are dends; money colle ived together, list it	alimony; child sup ected from lawsuits	; royalties; ar	Security, unemployment, nd gambling and lottery
	List ea	ach sour	ce and t	he gross inco	me from ea	ch source separ	ately. Do	not include income	that you listed in li	ne 4.	
		la.		· ·		·	•		·		
	_	lo 'es Fill	in the de	alict							
	_ '	C3. I III	iii liile de	italis.							
					Debtor 1	of income	Gros	s income from	Debtor 2 Sources of in	como	Gross income
					Describe b		each (befo	source re deductions and sions)	Describe below		(before deductions and exclusions)
From January 1 of current year until Soc the date you filed for bankruptcy:			Social S	ecurity		\$9,500.00	Social Secu	rity	\$5,650.00		
					Pension			\$5,400.00			
For last calendar year: Social (January 1 to December 31, 2017)			Social S	ecurity		\$24,936.00	Social Secu	rity	\$26,764.00		
					Pension			\$8,583.00			
For the calendar year before that: (January 1 to December 31, 2016) Social Security \$24,936.00				Social Secu	rity	\$26,764.00					
					Pension			\$8,583.00			
Pa	rt 3:	List Ce	rtain Pa	yments You	Made Befo	re You Filed for	r Bankru _l	otcy			
6.	Ara ai	ther De	htor 1's	or Debtor 2	's dahts nr	marily consume	ar dahts?	•			
٥.	_	lo. N e	ither De	ebtor 1 nor D	ebtor 2 ha	•	sumer de	bts. Consumer del	bts are defined in 1	1 U.S.C. § 10	01(8) as "incurred by an
		Dı	ring the	90 days befo	re vou filed	for bankruptcy of	did you na	ay any creditor a to	tal of \$6 425* or mo	ore?	
] _{No.}	Go to line 7	•	Tor barmapioy, c	ala you po	ay arry broanter a to-	tar or \$6, 126 or 111	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
] _{Yes}								the total amount you
						ot include payme o an attorney for			igations, such as o	hild support	and alimony. Also, do
		*	Subject	to adjustmen	t on 4/01/19	and every 3 year	ars after th	nat for cases filed o	n or after the date	of adjustmen	t.
	■ Y					e primarily cons for bankruptcy, o		bts. By any creditor a to	tal of \$600 or more	?	
			l _{No.}	Go to line 7							
			Yes			r to whom you pa	aid a total	of \$600 or more ar	nd the total amoun	t you paid tha	at creditor. Do not
	include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.										
	Credi	itor's N	ame and	d Address		Dates of paym	ent	Total amount	Amount you	Was this	payment for
	Ocw	en Loa	ın Serv	icina		4/18		paid \$7,692.00	still owe \$430,237.00	■ Mortga	age
		_ :		-				. ,	. ,	- wortga	age .

Ocwen Loan Servicing 4/18 \$7,692.00 \$430,237.00 ■ Mortgage Attn: Bankruptcy 3/18 1661 Worthington Rd. 2/18 Suite 100 □ Credit Card	Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this payment for
west Paim Beach, FL 33409	Attn: Bankruptcy 1661 Worthington Rd.	3/18	\$7,692.00	\$430,237.00	☐ Car ☐ Credit Card ☐ Loan Repayment ☐ Suppliers or vendors

		iane R Cobb		Cas	se number (if known)		
7.	Insiders i	year before you filed for bankrupt nclude your relatives; any general pa you are an officer, director, person in s you operate as a sole proprietor.	artners; relatives of any n control, or owner of 20	general partners; partne % or more of their voting	erships of which yo g securities; and ar	u are a general p ny managing age	artner; corporations nt, including one for
	■ No □ Yes	List all payments to an insider.					
	Insider's	s Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for thi	s payment
В.	insider?	year before you filed for bankrupt ayments on debts guaranteed or cos		•	any property on a	ccount of a debt	that benefited an
	■ No						
	☐ Yes	List all payments to an insider					
	Insider's	s Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for thi Include creditor	
Par	t 4: Ide	entify Legal Actions, Repossessio	ns, and Foreclosures				
<i>.</i>	List all su modificat	year before you filed for bankrupt ch matters, including personal injury ons, and contract disputes. Fill in the details.					
	Case tit		Nature of the case	Court or agency		Status of the o	case
10.		year before you filed for bankrupt that apply and fill in the details belo		operty repossessed, f	oreclosed, garnis	hed, attached, s	eized, or levied?
	_	Go to line 11.					
		Fill in the information below. Name and Address	Describe the Prope	r41.4	Date		Value of the
	Creditor	Name and Address	Explain what happe		Date		property
11.	accounts No	O days before you filed for bankru s or refuse to make a payment bed Fill in the details.			nancial institution	, set off any amo	ounts from your
		Name and Address	Describe the action	the creditor took	Date taken	action was	Amount
12.		year before you filed for bankrupt pointed receiver, a custodian, or a		operty in the possess			of creditors, a
	■ No						
	☐ Yes						
Par	t 5: Lis	t Certain Gifts and Contributions					
13.	■ No	years before you filed for bankrup	ptcy, did you give any (gifts with a total value	of more than \$60	0 per person?	
	Gifts wi	Fill in the details for each gift. th a total value of more than \$600	Describe the g	ifts		s you gave	Value
	Person Address	to Whom You Gave the Gift and			the g	ii i S	

Official Form 107

	otor 1 Robert W Cobb otor 2 Diane R Cobb			Case number ((if known)	
14.	Within 2 years before you filed for bankro ■ No □ Yes. Fill in the details for each gift or c			ns with a tota	I value of more than	\$600 to any charity?
	Gifts or contributions to charities that t more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code	otal	Describe what you contributed		Dates you contributed	Value
Part	t 6: List Certain Losses					
	Within 1 year before you filed for bankru or gambling?	ptcy or	since you filed for bankruptcy, did y	you lose anyt	hing because of thef	t, fire, other disaster,
	■ No □ Yes. Fill in the details.					
	Describe the property you lost and	Descri	be any insurance coverage for the l	oss	Date of your	Value of property
	how the loss occurred		the amount that insurance has paid. Loce claims on line 33 of <i>Schedule A/B</i> :		loss	lost
Part	t 7: List Certain Payments or Transfers	;				
	consulted about seeking bankruptcy or pinclude any attorneys, bankruptcy petition p □ No ■ Yes. Fill in the details. Person Who Was Paid Address Email or website address			·	Date payment or transfer was made	Amount of payment
	Person Who Made the Payment, if Not Y	ou			muuc	
	Jacoby & Jacoby, Attorneys At Law 1737 North Ocean Avenue Medford, NY 11763	1	Attorney Fees		5/23/18	\$650.00
	Within 1 year before you filed for bankru promised to help you deal with your crec Do not include any payment or transfer that No Yes. Fill in the details.	litors o	to make payments to your creditor		r transfer any prope	rty to anyone who
	Person Who Was Paid Address		Description and value of any prop transferred	erty	Date payment or transfer was made	Amount of payment
	Within 2 years before you filed for bankri transferred in the ordinary course of you include both outright transfers and transfers include gifts and transfers that you have already No Yes. Fill in the details.	r busin made a	ess or financial affairs? as security (such as the granting of a s ed on this statement.	ecurity interes	erty to anyone, other t or mortgage on your	property). Do not
	Person Who Received Transfer Address Person's relationship to you		Description and value of property transferred		any property or received or debts change	Date transfer was made

Del	otor 2	Diane R Cobb			Case num	ber (if known)	
19.	bene =	in 10 years before you filed for bankruptericiary? (These are often called asset-protection)		y property to a	ı self-settle	d trust or similar device	of which you are a
		Yes. Fill in the details. ne of trust	Description and v	alue of the pro	perty trans	sferred	Date Transfer was
	1.0	Elist of Oostolo Financial Assessment lead	manuscrate Octo Domocia	D 1 0			made
	t 8:	= · ·					
20.	sold, Inclu hous	in 1 year before you filed for bankruptcy, , moved, or transferred? ude checking, savings, money market, or ses, pension funds, cooperatives, associ	other financial accour	ts; certificates	s of deposi	•	, ,
		No Yes. Fill in the details.					
		iress (Number, Street, City, State and ZIP	Last 4 digits of account number	Type of acco instrument	unt or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
21.	1. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?						
	_	No Yes. Fill in the details.					
		ne of Financial Institution dress (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, St State and ZIP Code)		Describe	the contents	Do you still have it?
22.	2. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? No						
		Yes. Fill in the details.					
		ne of Storage Facility dress (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, State and ZIP Code)		Describe	the contents	Do you still have it?
Pai	t 9:	Identify Property You Hold or Control for	or Someone Else				
23.		rou hold or control any property that someone.	eone else owns? Inclu	ide any proper	rty you borı	rowed from, are storing f	or, or hold in trust
		No Yes. Fill in the details.					
		ner's Name dress (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, St Code)		Describe	the property	Value
Pai	t 10:	Give Details About Environmental Infor	mation				
For	the pu	urpose of Part 10, the following definition	ns apply:				
	toxic	ironmental law means any federal, state, c substances, wastes, or material into the dations controlling the cleanup of these s	e air, land, soil, surface	water, ground			
	Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.						
	Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.						

Official Form 107

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

Robert W Cobb

Debtor 1 Debtor 2

	otor 1 otor 2	Robert W Cobb Diane R Cobb		Case	e number (if known)	
24.	Has a	ny governmental unit notified you that	you may be liable or potentially liable	unde	er or in violation of an environme	ental law?
		No				
	□ \	es. Fill in the details.				
		e of site 'ess (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)		Environmental law, if you know it	Date of notice
25.	Have	you notified any governmental unit of	any release of hazardous material?			
		No /es. Fill in the details.				
		e of site less (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)		Environmental law, if you know it	Date of notice
26.	Have	you been a party in any judicial or adm	inistrative proceeding under any envi	ronm	ental law? Include settlements a	and orders.
		No /es. Fill in the details.				
		Title Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Natu	ure of the case	Status of the case
Par	t 11:	Give Details About Your Business or 0	Connections to Any Business			
27.	Withi	n 4 years before you filed for bankrupto	cy, did you own a business or have an	y of t	the following connections to any	business?
	[☐ A sole proprietor or self-employed in	a a trade, profession, or other activity,	eithe	er full-time or part-time	
	_	☐ A member of a limited liability comp				
	_	☐ A partner in a partnership	, (, ,	F (- ,	
	_	☐ An officer, director, or managing exe	ecutive of a corporation			
	_	An owner of at least 5% of the voting	•			
	_					
	_	No. None of the above applies. Go to P				
		es. Check all that apply above and fill		i.	Complemental antification number	
	Addı	ness Name ress	Describe the nature of the business		Employer Identification number Do not include Social Security	
	(Numb	er, Street, City, State and ZIP Code)	Name of accountant or bookkeeper		Dates business existed	
28.	28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.					
		No /es. Fill in the details below.				
	Nam		Date Issued			
	Addı					

Debtor Debtor			Case number (if known)			
Part 12	Sign Below					
are true with a b		tatement,	and any attachments, and I declare under penalty of perjury that the answers concealing property, or obtaining money or property by fraud in connection risonment for up to 20 years, or both.			
/s/ Rol	pert W Cobb	/s/ Dia	ne R Cobb			
Rober	t W Cobb	Diane R Cobb				
Signati	re of Debtor 1	Signature of Debtor 2				
Date	May 31, 2018	Date	May 31, 2018			
Did you	attach additional pages to Your Statement of F	inancial A	Affairs for Individuals Filing for Bankruptcy (Official Form 107)?			
■ No						
☐ Yes						
Did you ■ No	pay or agree to pay someone who is not an att	orney to h	nelp you fill out bankruptcy forms?			
☐ Yes.	Name of Person Attach the Bankruptcy Pe	etition Prep	parer's Notice, Declaration, and Signature (Official Form 119).			

Fill in this infor	mation to identify your	case:		
Debtor 1	Robert W Cobb			
Debtor 2	First Name Diane R Cobb	Middle Name	Last Name	
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	EASTERN DISTR	RICT OF NEW YORK	
Case number (if known)				Check if this is an amended filing
Official Fo		n for Indiv	viduals Filing Under Chap	oter 7 12/15
	ividual filing under cha	· -	ill out this form if:	
You must file thi	ever is earlier, unless th	ithin 30 days after	not expired. r you file your bankruptcy petition or by the dat ne time for cause. You must also send copies to	
	eople are filing togethen	in a joint case, bo	oth are equally responsible for supplying corre	ct information. Both debtors must
	and accurate as possib our name and case nur		is needed, attach a separate sheet to this form.	On the top of any additional pages,
Part 1: List Y	our Creditors Who Have	e Secured Claims		
		art 1 of Schedule [D: Creditors Who Have Claims Secured by Prop	erty (Official Form 106D), fill in the
information be Identify the cr	elow. reditor and the property t	hat is collateral	What do you intend to do with the property secures a debt?	that Did you claim the property as exempt on Schedule C?
Creditor's (name:	Ocwen Loan Servicin	g, Llc	☐ Surrender the property. ☐ Retain the property and redeem it.	■ No
Description of	8 East End Road R	ocky Point,	☐ Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property securing debt	NY 11778 Suffolk	County	■ Retain the property and [explain]: Retain collateral and continue making regular payments	
Part 2: List Y	our Unexpired Persona	I Droporty Lossos		
For any unexpire in the information	ed personal property le on below. Do not list rea	ase that you listed Il estate leases. Ur	d in Schedule G: Executory Contracts and Unex nexpired leases are leases that are still in effect the trustee does not assume it. 11 U.S.C. § 365	t; the lease period has not yet ended.
Describe your u	unexpired personal pro	perty leases		Will the lease be assumed?
Lessor's name:				□ No
Description of le Property:	ased			☐ Yes
Lessor's name:				□ No
Description of le Property:	ased			☐ Yes
				☐ 162

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

Debtor 1 Robert W Cobb Debtor 2 Diane R Cobb	Case number (if known)
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Part 3: Sign Below	
Under penalty of perjury, I declare that I have indicated my intention at	pout any property of my estate that secures a debt and any personal
property that is subject to an unexpired lease.	
X /s/ Robert W Cobb Robert W Cobb	X /s/ Diane R Cobb Diane R Cobb
Signature of Debtor 1	Signature of Debtor 2
Date May 31, 2018	Date May 31, 2018

Fill in this inforr	mation to identify your case:				Ch	eck one box	only as d	irected in	this form and in	Form
Debtor 1	Robert W Cobb					2A-1Supp:				
Debtor 2	Diane R Cobb					.				
(Spouse, if filing)	Diane it Cobb					1. There i	•	•		
United States E	Bankruptcy Court for the: Eastern Dist	rict of New	York			applie	s will be n	nade und	ne if a presumpt er <i>Chapter 7 Me</i> i 122A-2).	
Case number					l I .	_	`		,	,
(II KHOWH)] [_'				apply now beca out it could apply	
						☐ Check if	this is a	n amend	ded filing	
Official F	orm 122A - 1									
Chapter	7 Statement of Your	Curren	t Mo	nthl	y Inc	ome				12/15
attach a separate case number (if l qualifying militar	and accurate as possible. If two married possible to this form. Include the line numb cnown). If you believe that you are exempt y service, complete and file Statement of Iculate Your Current Monthly Income	er to which the difference of	he additio esumption	nal infor	mation a se becau	ipplies. On th se you do no	e top of ai	ny addition narily con	nal pages, write y sumer debts or b	our name and ecause of
1. What is v	our marital and filing status? Check	one only.								
	arried. Fill out Column A, lines 2-11.	7.10 G.m.y.								
_	d and your spouse is filing with you.	Fill out both	Column	s A and	B. lines	2-11.				
_	d and your spouse is NOT filing with				-					
_	ng in the same household and are no	•	•	•		lumns A and	IR lines 2	P-11		
	ng separately or are legally separated		•				,		this box, you de	eclare under
pen	alty of perjury that you and your spouse g apart for reasons that do not include	e are legally	separate	d under	nonban	kruptcy law	that applie	es or that		
101(10A). For the 6 months,	rage monthly income that you received from example, if you are filing on September 15, the add the income for all 6 months and divide the same rental property, put the income from	he 6-month pene total by 6. F	eriod would fill in the re	d be Mar esult. Do	ch 1 throu not includ	igh August 31 de any income	. If the amo	ount of you ore than or	r monthly income vace. For example,	raried during if both
•						Column A Debtor 1		Column Debtor non-fili		
	ss wages, salary, tips, bonuses, over	time, and c	ommissi	ons (be	fore all	\$	0.00	\$	0.00	
payroll de 3. Alimony a	auctions). and maintenance payments. Do not ir	iclude paym	ents from	ı a spou	se if	<u> </u>		Ť		
	is filled in.					\$	0.00	\$	0.00	
of you or from an ui and roomi	nts from any source which are regular your dependents, including child su married partner, members of your hou mates. Include regular contributions from	pport. Includes sehold, your managed as spouse of the contraction of	de regula depende	r contrib ents, pa	outions rents,	\$	0.00	\$	0.00	
	o not include payments you listed on lir		m			Ť		Ť		
	3			btor 1						
Gross rec	eipts (before all deductions)	\$	0.00	_						
Ordinary a	and necessary operating expenses	- \$ _	0.00	_						
Net month	ly income from a business, profession,	or farm $_{_}$	0.00	Сору	here ->	\$	0.00	\$	0.00	
6. Net incon	ne from rental and other real propert	y								
		•		btor 1						
	eipts (before all deductions)	\$	1,40	0.00						
•	and necessary operating expenses	-\$			Сору					
Net month property	ly income from rental or other real	\$	1,40	00.00	here ->	\$ 1,4	400.00	\$	0.00	
	dividends and royalties	-				\$	0.00	\$	0.00	

Official Form 122A-1

7. Interest, dividends, and royalties

PEDIOI I	lobert W Cobb Diane R Cobb			Case numbe	er (if known)			
				Column A Debtor 1		Column B Debtor 2	or	
8. Unem	ployment compensation			\$	0.00	\$	0.00	
the So	enter the amount if you contend that the amour cial Security Act. Instead, list it here:		efit unde	r				
	you §		0.00					
	your spouse S		0.00					
	on or retirement income. Do not include any al t under the Social Security Act.	mount received that v	vas a	\$	450.00	\$	0.00	
Do not receive	e from all other sources not listed above. Sp include any benefits received under the Social ed as a victim of a war crime, a crime against hustic terrorism. If necessary, list other sources on elow.	Security Act or paymermanity, or internation	ents al or					
	·			\$	0.00	\$	0.00	
				\$	0.00	\$	0.00	
	Total amounts from separate pages, if any.		+	\$	0.00	\$	0.00	
	ate your total current monthly income. Add li olumn. Then add the total for Column A to the to		\$	1,850.00	+ \$ _	0.00	= \$	1,850.00
12. Calcul	Determine Whether the Means Test Applies late your current monthly income for the year	r. Follow these steps:		Con	ov line 11 l	hara->	¢	1 050 00
	copy your total current monthly income from line	11		Сор	y line 111	nere=>	\$	1,850.00
	fultiply by 12 (the number of months in a year) he result is your annual income for this part of the	ne form				12	x	12 22,200.00
	ate the median family income that applies to		ono:					
13. Calcul	late the median family income that applies to		eps:]					
Fill in t	he state in which you live.	NY] 1					
Fill in t	he number of people in your household.	2						
To find	he median family income for your state and size I a list of applicable median income amounts, go form. This list may also be available at the ban	online using the link	specified	in the separ	ate instruc	tions 13	ß	68,087.00
14. How d	lo the lines compare?							
14a.	■ Line 12b is less than or equal to line 13. G Go to Part 3.	On the top of page 1,	check box	x 1, There is	no presun	nption of abu	ise.	
14b.	Line 12b is more than line 13. On the top Go to Part 3 and fill out Form 122A-2.	of page 1, check box	2, The pi	resumption o	f abuse is	determined i	by Form 1	22A-2.
art 3:	Sign Below							
В	y signing here, I declare under penalty of perjury	y that the information	on this st	atement and	in any atta	achments is	true and c	orrect.
Х	/s/ Robert W Cobb	x	/s/ Diar	ne R Cobb				
	Robert W Cobb Signature of Debtor 1			R Cobb re of Debtor 2	2			
Date	May 31, 2018 MM / DD / YYYY	Date	May 31	, 2018				
If	you checked line 14a, do NOT fill out or file For	m 122A-2.	, 50					
	you checked line 14b, fill out Form 122A-2 and							

Robert W Cobb

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Eastern District of New York

In re	Robert W Cobb Diane R Cobb		Case No.	
		Debtor(s)	Chapter	7
	DISCLOSURE OF	COMPENSATION OF ATTORN	EY FOR DE	CBTOR(S)
co	ompensation paid to me within one year b	nkr. P. 2016(b), I certify that I am the attorney after the filing of the petition in bankruptcy, or templation of or in connection with the bankru	agreed to be paid	to me, for services rendered or to
	For legal services, I have agreed to acc			1,365.00
	Prior to the filing of this statement I ha	ve received	\$	650.00
	Balance Due		\$	715.00
2. T	he source of the compensation paid to me	vas:		
	■ Debtor □ Other (specify)			
3. T	he source of compensation to be paid to n	e is:		
	■ Debtor □ Other (specify)			
i. •	I have not agreed to share the above-di-	closed compensation with any other person unle	ess they are mem	pers and associates of my law firm
Ε		ed compensation with a person or persons who st of the names of the people sharing in the cor		
5. Iı	n return for the above-disclosed fee, I hav	agreed to render legal service for all aspects of	the bankruptcy c	ase, including:
b. c.	 Preparation and filing of any petition, so Representation of the debtor at the meet [Other provisions as needed] Negotiations with secured cr 	n, and rendering advice to the debtor in determ needules, statement of affairs and plan which man of creditors and confirmation hearing, and a ditors to reduce to market value; exemplications as needed; preparation an ens on household goods.	y be required; ny adjourned hea otion planning;	rings thereof; preparation and filing of
б. В		disclosed fee does not include the following ser in any dischargeability actions, judiciang.		es, relief from stay actions o
		CERTIFICATION		
	certify that the foregoing is a complete stankruptcy proceeding.	ement of any agreement or arrangement for pay	ment to me for re	epresentation of the debtor(s) in
Ma Da	ay 31, 2018	/s/ Richard A. Jacob Richard A. Jacoby, I		
		Signature of Attorney	-	
		Jacoby & Jacoby, A 1737 North Ocean A		V
		Medford, NY 11763 631-289-4600		
		Name of law firm		

United States Bankruptcy Court Eastern District of New York

In re	Robert W Cobb Diane R Cobb		Case No.	
		Debtor(s)	Chapter	7

VERIFICATION OF CREDITOR MATRIX

The above named debtor(s) or attorney for the debtor(s) hereby verify that the attached matrix (list of creditors) is true and correct to the best of their knowledge.

Date:	May 31, 2018	/s/ Robert W Cobb
		Robert W Cobb
		Signature of Debtor
Date:	May 31, 2018	/s/ Diane R Cobb
		Diane R Cobb
		Signature of Debtor
Date:	May 31, 2018	/s/ Richard A. Jacoby, Esq.
		Signature of Attorney
		Richard A. Jacoby, Esq.
		Jacoby & Jacoby, Attorneys At Law
		1737 North Ocean Avenue
		Medford, NY 11763
		631-289-4600

USBC-44 Rev. 9/17/98

All Island Media 1 Rodeo Dr. Brentwood, NY 11717

AT&T Wireless PO Box 537113 Atlanta, GA 30353

Bose The Mountain Framingham, MA 01701-9168

Capital One Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130

Catholic Home Care 110 Bi-County Blvd. Suite 114 Farmingdale, NY 11735

Citicards Citicorp Credit Services/Attn: Centraliz Po Box 790040 Saint Louis, MO 63179

Comenitybank/venus Attn: Bankruptcy Dept Po Box 182125 Columbus, OH 43218

Credit One Bank Attn: Bankruptcy Po Box 98873 Las Vegas, NV 89193

Discover Financial Po Box 3025 New Albany, OH 43054

Diversified Consultants P.O. Box 551268 Jacksonville, FL 32255-1268 Evine PO Box 390913 Minneapolis, MN 55439

Fingerhut
Bankruptcy Dept
6250 Ridgewood Rd
Saint Cloud, MN 56303

First Premier Bank Po Box 5524 Sioux Falls, SD 57117

General Surgery Assoc. 226 Belle Meade Rd. Suite C East Setauket, NY 11733

International Recovery P.O. Box 651 Nesconset, NY 11767

It Cosmetics PO Box 2003 Harlan, IA 51593

John T. Mather Mem Hosp. Attn: Patient Accounts 75 North Country Road Port Jefferson, NY 11777

Kohls/Capital One Kohls Credit Po Box 3120 Milwaukee, WI 53201

Midnight Velvet Attn: Bankruptcy 1112 7th Ave Monroe, WI 53566

Miles Kimball P.O. Box 2860 Monroe, WI 53566 North Shore Agency 270 Spagnoli Rd Ste 110 Melville, NY 11747

Ocwen Loan Servicing, Llc Attn: Research/Bankruptcy 1661 Worthington Road, Suite 100 West Palm Beach, FL 33409

Publishing Clearing House 382 Channel Drive Port Washington, NY 11050

Stony Brook Orthopaedic A Allied Rehab Med Service 14 Technology Dr Suite 12 East Setauket, NY 11733

Stony Brook University Ho PO Box 29320 New York, NY 10087-9320

Syncb/Toys R Us Attn: Bankruptcy Po Box 965060 Orlando, FL 32896

Tbom/atls/fortiva Mc 5 Concourse Pkwy Atlanta, GA 30328

The Levinbrook Law Firm 77 Arkay Drive Suite C1 Hauppauge, NY 11788

Transworld Systems Inc Po Box 15618 Wilmingotn, DE 19850

ValuePay 9550 Regency Square Blvd Suite 500 Jacksonville, FL 32225 Vengroff Williams Inc PO Box 4155 Sarasota, FL 34230

Wen Hair Care 41-550 Eclectic Street Suite 200 Palm Desert, CA 92260

Zwanger-Pesiri Radiology 150 East Sunrise Hwy Suite 201 Lindenhurst, NY 11757

UNITED STATES BANKRUPTCY COURT EASTERN DISTRICT OF NEW YORK

STATEMENT PURSUANT TO LOCAL **BANKRUPTCY RULE 1073-2(b)**

DEBTOR(S):	Diane R Cobb	CASE NO.:.
	Local Bankruptcy Rule 1073-2(b), Cases, to the petitioner's best knowledge.	the debtor (or any other petitioner) hereby makes the following disclosure edge, information and belief:
was pending at any t spouses or ex-spouse partnership and one have, or within 180	time within eight years before the fil es; (iii) are affiliates, as defined in 1 or more of its general partners; (vi)	poses of E.D.N.Y. LBR 1073-1 and E.D.N.Y. LBR 1073-2 if the earlier case ing of the new petition, and the debtors in such cases: (i) are the same; (ii) are I U.S.C. § 101(2); (iv) are general partners in the same partnership; (v) are a are partnerships which share one or more common general partners; or (vii) of the Related Cases had, an interest in property that was or is included in the
■ NO RELATED (CASE IS PENDING OR HAS BEEN	N PENDING AT ANY TIME.
☐ THE FOLLOWI	NG RELATED CASE(S) IS PEND	NG OR HAS BEEN PENDING:
1. CASE NO.:	JUDGE: DISTRICT/DI	VISION:
CASE STILL PEND	DING (Y/N): [<i>If</i>	closed] Date of closing:
CURRENT STATU	JS OF RELATED CASE:	(Discharged/awaiting discharge, confirmed, dismissed, etc.)
MANNED IN WHI		
		to NOTE above):
	LISTED IN DEBTOR'S SCHEDUI F RELATED CASE:	E "A" ("REAL PROPERTY") WHICH WAS ALSO LISTED IN
2. CASE NO.:	JUDGE: DISTRICT/DI	VISION:
CASE STILL PEND	DING (Y/N): [<i>If</i>	closed] Date of closing:
CURRENT STATU	JS OF RELATED CASE:	(Discharged/awaiting discharge, confirmed, dismissed, etc.)
MANNER IN WHI	ICH CASES ARE RELATED (Refer	to NOTE above):
	LISTED IN DEBTOR'S SCHEDUI F RELATED CASE:	E "A" ("REAL PROPERTY") WHICH WAS ALSO LISTED IN
3. CASE NO.:	JUDGE: DISTRICT/DI	VISION:
CASE STILL PEND	DING (Y/N): [<i>I</i> t	closed] Date of closing:

Robert W Cobb

DISCLOSURE OF RELATED CASES (cont'd)	
CURRENT STATUS OF RELATED CASE:(D	Discharged/awaiting discharge, confirmed, dismissed, etc.)
MANNER IN WHICH CASES ARE RELATED (Refer to	o NOTE above):
REAL PROPERTY LISTED IN DEBTOR'S SCHEDULE SCHEDULE "A" OF RELATED CASE:	"A" ("REAL PROPERTY") WHICH WAS ALSO LISTED IN
	who have had prior cases dismissed within the preceding 180 days may not red to file a statement in support of his/her eligibility to file.
TO BE COMPLETED BY DEBTOR/PETITIONER'S AT	ΓORNEY, AS APPLICABLE:
I am admitted to practice in the Eastern District of New Yo	ork (Y/N): Y
I certify under penalty of perjury that the within bankruptcy as indicated elsewhere on this form. /s/ Richard A. Jacoby, Esq.	y case is not related to any case now pending or pending at any time, except
Richard A. Jacoby, Esq. Signature of Debtor's Attorney Jacoby & Jacoby, Attorneys At Law 1737 North Ocean Avenue	Signature of Pro Se Debtor/Petitioner
Medford, NY 11763 631-289-4600	Signature of Pro Se Joint Debtor/Petitioner
	Mailing Address of Debtor/Petitioner
	City, State, Zip Code
	Area Code and Telephone Number

Failure to fully and truthfully provide all information required by the E.D.N.Y. LBR 1073-2 Statement may subject the debtor or any other petitioner and their attorney to appropriate sanctions, including without limitation conversion, the appointment of a trustee or the dismissal of the case with prejudice.

NOTE: Any change in address must be reported to the Court immediately IN WRITING. Dismissal of your petition may otherwise result.

USBC-17 Rev.8/11/2009